

# USE THIS FORM FOR ALL ENTRIES EXCEPT CRAFTS

THE CLEVELAND MUSEUM OF ART  
FIFTIETH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE  
MAY 1 to JUNE 16, 1968

Born in Cleveland ☐ YES ☒ NO  
Entered Previous May Shows? ☒ YES ☐ NO

PLEASE  
LETTER  
PLAINLY  
OR TYPE

Collaborator \_\_\_\_\_ Artist EILEEN B. INGALLS  
FIRST NAME LAST NAME  
Permanent Address STONYBROOK FARM 44022  
STREET CITY ZIP COUNTY Tel. 247-6212  
Student Temporary Address RIVER ROAD CHAGRIN FALLS  
STREET CITY ZIP COUNTY

Collect return shipment desired. ☐ YES ☐ NO Return address \_\_\_\_\_  
Please bring Registration Fee of \$2.00 (Cash or Check) with your entries.

DAMAGED PRIOR TO  
Arrival

CLASS <u>1</u>	MEDIUM <u>ACRYLIC</u>	CLASS <u>1</u>	MEDIUM <u>COLLAGE</u>	CLASS <u>4</u>	MEDIUM <u>WOOD</u>												
TITLE <u>MARKING TIME</u>		TITLE <u>THE LONG FAREWELL</u>		TITLE <u>EDIFICE OEDIPUS</u>													
DESCRIPTION & DIMENSIONS <u>36" x 36"</u>		DESCRIPTION & DIMENSIONS <u>48" x 40"</u>		DESCRIPTION & DIMENSIONS <u>MINIMAL 6 FT X 5 FT</u>													
NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE <u>300</u>	NUMBER FOR SALE	NUMBER IN EDITION (GRAPHIC PRTS.)	PRICE <u>175</u>												
Artist <u>EILEEN B. INGALLS</u>		Artist <u>EILEEN B. INGALLS</u>		Artist <u>EILEEN B. INGALLS</u>													
FIRST NAME LAST NAME		FIRST NAME LAST NAME		FIRST NAME LAST NAME													
<p><b>SOLD AS MAN RECEIVED JUN 1968</b></p> <p>363</p> <table border="1"> <tr> <td>ACCEPTED</td> <td>REJECTED</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		ACCEPTED	REJECTED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>364</p> <table border="1"> <tr> <td>ACCEPTED</td> <td>REJECTED</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>		ACCEPTED	REJECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>362</p> <table border="1"> <tr> <td>ACCEPTED</td> <td>REJECTED</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>		ACCEPTED	REJECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1968.

It is also understood that accepted entries will remain on exhibition until June 16 1968.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Eileen B. Ingalls  
SIGNATURE

RETURN DATES FOR OBJECTS - Monday through Saturday 9 a.m. - 4:45 p.m. at Museum Service Entrance

SUBMIT ENTRIES WITH ENTRY BLANK AND  
FEE MARCH 9 THROUGH MARCH 16, 1968

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in triplicate is made up of N C R paper which does not require carbon.

Eileen B. Ingalls 58 525.68  
REJECTED: May 6 - May 11  
ACCEPTED: June 24 - June 29  
cash sw